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CONFIRMATION NO. 3833

Bib Data Sheet

SERIAL NUMBER 10/690,430	FILING OR 371(c) DATE 10/21/2003 RULE	CLASS 623	GROUP ART UNIT 3738	ATTORNEY DOCKET NO. 104558-200
APPLICANTS Brett Allison Taylor, Clayton, MO;				
** CONTINUING DATA ***** This appln claims benefit of 60/419,556 10/21/2002				
** FOREIGN APPLICATIONS *****				
IF REQUIRED, FOREIGN FILING LICENSE GRANTED** SMALL ENTITY ** ** 01/20/2004				
Foreign Priority claimed <input type="checkbox"/> yes <input type="checkbox"/> no 35 USC 119 (a-d) conditions <input type="checkbox"/> yes <input type="checkbox"/> no <input type="checkbox"/> Met after met Allowance Verified and Acknowledged		STATE OR COUNTRY MO	SHEETS DRAWING 13	TOTAL CLAIMS 43
Examiner's Signature _____ Initials _____		INDEPENDENT CLAIMS 5		
ADDRESS 28765				
TITLE INTERVERTEBRAL DISK PROSTHESIS				
FILING FEE RECEIVED 1068	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:		<input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees (Filing) <input type="checkbox"/> 1.17 Fees (Processing Ext. of time) <input type="checkbox"/> 1.18 Fees (Issue) <input type="checkbox"/> Other _____ <input type="checkbox"/> Credit	